REMARKS

Reconsideration of this application, as amended, is respectfully requested. An RCE accompanies this Amendment.

Claims 1-37 are pending. Claims 1-37 were rejected. No claims have been amended. No claims have been cancelled. No claims have been added. Support for the amendments is found in the specification, the drawings, and in the claims as originally filed. Applicants submit that the amendments do not add new matter.

Applicants reserve all rights with respect to the applicability of the Doctrine of Equivalents.

The specification has been objected to. More specifically, the Examiner has objected to the Abstract.

It is respectfully submitted that the Abstract complies with the requirements set out under MPEP §608.01(b). Applicants respectfully submit that no amendment to the abstract is necessary or required. However, in accordance with the Examiner's request and in an attempt to expedite prosecution of this application applicants have replaced the current Abstract with a new Abstract. Applicants respectfully request the Examiner to withdraw the objections to the Abstract.

Claims 1-37 have been rejected under 35 U.S.C. § 102(e) as being anticipated by U.S. Publication No. 2005/0027570 of Maier et al. ("Maier").

Applicants note that the present application is a National Phase of International Application No. PCT/SG2004/000382, filed on November 24, 2004, which claims priority from Singapore Patent Application No. 200306928-3, filed on November 27, 2003. That is, the present application is entitled to priority date of November 27, 2003. The Examiner

relies on Maier on basis of 35 U.S.C. § 102(e). The priority date of November 27, 2003 of

the present application is prior to April 30, 2004, which is the filing date of Maier. Maier is

a continuation-in-part of application No. 09/637,138 filed on August 11, 2000. Application

No. 09/637,138 was abandoned. Applicants submit herewith an Information Disclosure

Statement that includes a copy of application No. 09/637,138, which is available through

public PAIR.

Therefore, applicants respectfully request the Examiner to withdraw rejections of

claims 1-37 under 35 U.S.C. § 102(e) as being anticipated by Maier given the priority date

of November 27, 2003 of the present application.

Nevertheless, applicants submit the following remarks.

Applicants note that the same objections by the Examiner were raised in the earlier

Office Action dated 21 February 2008. The applicants submitted claim amendments on

June 18, 2008 to overcome the Examiner's objections. The arguments to supplement the

claim amendments and highlight the differences over the cited art were not presented at the

time in accordance with the agreement reached by the Examiner and the Attorney of record

in the telephone interview.

It appears that the Examiner still has not considered or appreciated all of the

features subject of the amendments previously submitted which correspond to the

amendments made during the prosecution in the international application

PCT/SG2004/00382 from which this application derives.

Previously presented claim 1 reads as follows:

A method for retrieving medical images from various sources and in different
formats, to enable the creation of teaching files and research datasets, for the
building of a personal medical image library, the method comprising:
   (a) <u>directly retrieving a plurality of medical images from various sources</u>;
   (b) storing the plurality of medical images in a database;

(c) generating a database record for the teaching files and research datasets;

(d) generating the teaching files and research datasets using at least one medical image of the plurality of medical images and additional information input by a user, the teaching files and research datasets being compliant with at least one predetermined schema;

(e) saving the teaching files and research datasets into the database;

(f) generating at least one index of the teaching files and research datasets; and

(g) automatically anonymizing patient identification data when the at least one medical image is retrieved from the various sources.

(emphasis added)

As set forth above, previously presented claim 1 refers to a method to retrieve medical images from various sources and in different formats, to enable the creation of teaching files and research databases by saving the teaching files and research datasets into the databases.

Maier discloses digital image collection and library system. More specifically, Maier discloses the following:

> Certain processes involve the collection and management of image data in disparate image data protocols and from different sources, and distribution of such image data to qualified recipients. For example, in the health care field, different health care providers, laboratory technicians, and the like, may create different images all relating to the same patient. Such images may be taken at different times, using different imaging methods and image data protocols, and may relate to different subject areas, while all relating to the same patient...

(Maier, paragraph [0005])(emphasis added)

In particular, Maier discloses the following:

System security and data security may be of particular importance in web-based image collection and distribution systems, for example, in health care contexts. As noted in the parent application, security requirements may exceed what can readily be provided using conventional identification codes and passwords, encryption, and secure socket layers. It may be desirable in some embodiments of system 300 to employ actual access blocking. To implement access blocking, an image-associated file or data may include a field or fields indicating blocking and access, with an enumeration of classes of users or even individual users who may have access to the record. Such access rules may also take into account the image subject identifier

that is associated with each image. For example, a "Block/Unblock" option may be provided, which allows the user to restrict access to a particular file. Such an option may be useful, for example, for a provider with patients who request that their information not be on the Web. <u>Selection of a "block" option at a provider interface may operate to prevent serving of an image from the image library, and/or to prevent collection of the image in the library in the first place</u>.

(Maier, paragraph [0053])(emphasis added)

Thus, Maier merely discloses a web-based system image collection for public access that allows users to login and view medical images. Claim 1, in contrast, defines a method for retrieving a plurality of medical images from various sources.

Claim 1 refers to retrieving a plurality of medical images and metadata (patient, pathology) <u>directly</u> from the image archive. This feature is not taught or suggested by Maier. The portion of Maier cited by the Examiner discloses the collection and management of image data (paragraph [0005]). Maier fails to disclose <u>directly retrieving</u> a plurality of medical images from various sources, as recited in previously presented claim 1.

Secondly, claim 1, as previously presented, requires generating teaching files using information from the image archive, and additional information provided by users. The portion of Maier cited by the Examiner, in contrast, discloses creating the image-source liaison (paragraph [0015]). Maier fails to disclose <u>generating the teaching files and research datasets using at least one medical image of the plurality of medical images and additional information input by a user, the teaching files and research datasets being compliant with at least one predetermined schema</u>, as recited in previously presented claim 1.

Thirdly, Maier merely discloses access blocking (paragraph [0053]). In contrast, previously presented claim 1 requires automatically anonymizing patient identification data when the at least one medical image is retrieved from the various sources. Automatically anonymizing when retrieving the image from the image archive prevents the ability to

identify a patient using the teaching file. Maier fails to disclose or suggest automatically anonymizing patient identification data when the at least one medical image is retrieved from the various sources, as recited in claim 1. Access blocking disclosed in Maier is not the same as automatically anonymizing patient identification data when the medical image is retrieved from the various sources as required claim 1. Maier simply provides a block or unblock option that allows some users access to view the image and blocks other users from viewing image (paragraph [0053]). Maier does not disclose or teach any type of anonymization process, as recited in claim 1. The anonymization process allows anyone to view the images but does not allow anyone to view the patient sensitive data. The invention as defined claim 1 in effect removes the patient sensitive data from the metadata of the image file, i.e. anonymizes the image file, to create the teaching file. In this manner the image or teaching file can be shared without the concern of disclosing the patient sensitive data. The automatic feature of the anonymization prevents the ability to identify a patient using the teaching file.

Additionally, there is nothing in Maier to suggest obtaining medical images from various sources, particularly different formats, as recited in claim 1.

Therefore, applicants respectfully submit that previously presented claim 1 is not anticipated by Maier under 35 U.S.C §102(e).

Given that claims 2-18 depend from claim 1, and add additional limitations, applicants respectfully submit that claims 2-18 are not anticipated by Maier under 35 U.S.C §102(e).

Given that claims 19-37 contain limitations that are similar to those limitations discussed with respect to amended claim 1, applicants respectfully submit that claims 19-37 are not anticipated by Maier under 35 U.S.C §102(e).

It is respectfully submitted that in view of the amendments and arguments set forth herein, the applicable rejections and objections have been overcome. If the Examiner believes a telephone conference would assist in the prosecution of the present application, the Examiner is invited to call the undersigned. If there are any additional charges, please charge Deposit Account No. 022666 for any fee deficiency that may be due.

Respectfully submitted,

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